

NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION

1. NAME OF NOMINEE (Type or Print Nominee's Full Name)		TO BE COMPLETED BY COUNTY FSA OFFICE	
2. ADDRESS OF NOMINEE		4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED	
3. NOMINEE'S CERTIFICATION: <i>I hereby agree to have my name placed on the ballot, that I will serve if elected, and if there is a conflict of interest, I will resign such position.</i> <input type="checkbox"/> <i>I DO want to witness the settling of tied votes with another nominee.</i> <input type="checkbox"/> <i>I DO NOT want to witness the settling of tied votes with another nominee.</i>		8. NOMINATOR'S CERTIFICATION: <i>If this nomination is by other than self, the following eligible voter or representative of a community based organization hereby nominates the above-named person to be a candidate in the next County FSA Committee election for the county:</i>	
3A. SIGNATURE OF NOMINEE		3B. DATE	3C. SIGNATURE OF NOMINATOR
<input type="checkbox"/> <i>Check here if nominee is a write-in candidate.</i>		<i>(If the individual is self nominating, no signature is required).</i>	
9. TO BE COMPLETED BY NOMINEE			
VOLUNTARY INFORMATION FOR MONITORING PURPOSES. The following information is requested by the Federal Government in order to monitor FSA's compliance with federal laws prohibiting discrimination against program participants on the basis of race, color, national origin, religion, sex, marital status, handicapped condition, or age. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your nomination or to discriminate against you in any way.			
ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		RACE (Choose as many boxes as applicable) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
		GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	

INSTRUCTIONS FOR COMPLETING THIS FORM

Complete the form as follows:

- ITEM 1 Type or Print the nominee's full name. The nominee must be:
- A. Eligible to vote in the designated County FSA Committee election.
 - B. Eligible to hold the office of County FSA Committee member.
 - C. Willing to serve if elected.
- ITEM 2 Enter the nominee's current address.
- ITEM 3 The nominee must check one of the boxes to indicate a preference regarding the settling of tied votes.
- ITEMS 3A & 3B The nominee must sign and date.
- ITEMS 8A & 8B The nominator must sign and date. *(If the individual is self nominating, no signature is required.)*
- ITEM 9 Completing this item is voluntary.

ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 1, 2011.

NOTE:

The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a - as amended). The authority for requesting the information identified on this form is the Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246). The information will be used to obtain nominees for election to the County FSA Committee. The information collected on this form may be disclosed to other Federal, State, local government agencies, tribal agencies, and non-governmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for County Personnel Records, USDA/FSA-6. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for nomination for election to the County FSA Committee.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0229. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.



United States
Department
of Agriculture

Farm and Foreign
Agricultural Services

Pierce County FSA (S. Puget Sound Area)
1011 East Main Ave. Ste. 107
Puyallup WA 98372-6738

May 2011

Dear Producer:

You are encouraged to nominate yourself or someone else to represent your interests on the Farm Service Agency County Committee. FSA county committees are a unique arrangement that allow local guidance for federal farm programs. These committees are a direct link between the farm community and the U.S. Department of Agriculture. Committee members are a critical component of ensuring FSA agricultural programs serve the needs of local producers. Committee members are compensated for their time and travel related to county committee duties.

The duties of county FSA committee members include:

- Participating in county meetings and hearing producer appeals at the local county level;
- Informing farmers of the purpose and provisions of FSA programs;
- Monitoring changes in farm programs and assisting with delivery of FSA farm programs at the local level;
- Performing other duties as assigned by the State FSA Committee.

This year, nominations are for a committee member to represent producers in Pierce County (S. Puget Sound Area) Local Administrative Area (LAA) #2. Please feel free to call the County Office for a more detailed description or a copy of the LAA map.

LAA #2 represents all of Mason and Kitsap Counties and that portion of Pierce County west of The Narrows (known as Key Peninsula), northwest of I-5 and South of Hwy 16 to The Narrows.

To hold office as a county committee member, a person must meet the basic eligibility requirements described below:

- Actively participate in the operation of a farm or ranch;
- Be eligible to vote in a county committee election. (Be of legal voting age and have an interest in a farm or ranch; not of legal voting age but supervises and conducts farming operations on an entire farm; participates in any FSA program);
- Reside in the LAA in which the person is a candidate.

The nomination form FSA-669A allows individuals to nominate themselves or any other person as a candidate. Each form submitted must be limited to one nominee and signed and dated by the nominee (Item 3A) to indicate a willingness to have their name placed on the ballot and agree to serve if elected. Item 8A reflects the nominator's signature and date. For detailed instructions on completing the nomination form or requesting a form, please contact your local county FSA office, or refer to the website <http://www.fsa.usda.gov/wa3>.

The deadline for nominations is **August 1, 2011**. Completed nomination forms are to be submitted to the county FSA address listed at the top of this letter and should be returned, delivered, or postmarked no later than August 1, 2011.

Sincerely,
/ s / George Jaquish
County Executive Director



Pierce County FSA
1011 E. Main # 107
Puyallup, WA. 98373-6768
Phone: (253) 845-9272
Fax: (253) 445 9934

Office Hours
Monday – Friday
8:00 AM – 4:30 PM

County Committee
Lucy Cerqui, Chair
Harry Petersen, Vice-Chair
Joy Garitone, Member
Paddy Lewis Irwin, Member

Office Staff
George R. Jaquish, CED
Kathy Modin, PT

Farm Loan Staff
Mark Turner, FLM
(360) 354-5658
Jon Wilson, FLM
Jeff Peterson, FLO
(360) 748-0084

Important Dates to Remember

May 30
Memorial Day office closure
June 1
DCP/ACRE signup ends
June 30
Crop reporting deadline
July 15
ACRE production report deadline

Handicapped Accommodations:
Special accommodations will be arranged for those persons with a physical, vision, or hearing impaired disability. If special accommodations are needed, please contact our office.



NAP Deadlines

For the 2012 crop year, **September 30, 2011**, is the application deadline for obtaining perennial grazing and forage crop coverage under the Non-Insured Crop Disaster Assistance Program (NAP). Mint and wheat are also covered in this deadline.

Some of the basic eligibility requirements include annual reporting of crop acreages, providing actual production evidence on a yearly basis, obtaining a loss adjustor appraisal if the damaged crop will be destroyed or left unharvested. Production information for 2010 crops must be reported by **June 30, 2011**.

NAP coverage or federal crop insurance through the Risk Management Agency is pre-requisites for many FSA disaster programs.

2011 ACRE/DCP Deadline

The deadline to enroll in both the Average Crop Revenue Election (ACRE) and the Direct and Counter-cyclical Programs (DCP) is **June 1, 2011**.

Acreage Reporting Deadline

Acreage reports are required under the 2008 Farm Bill to maintain eligibility for the DCP and ACRE programs, as well as CRP, NAP, SURE and most livestock disaster programs. Reports are also required to commodity loan eligibility. **June 30, 2011**, is the final date to timely certify. Beyond that date, fees will be assessed for late-filed acreage reporting.

ACRE Production Deadline

Producers have until **July 15, 2011** to certify their 2010 ACRE production. Production amounts are used to calculate potential ACRE-ACRE payments and benchmark yields for future benefits. Failure to meet this deadline will require a refund of all 2010 payments and termination of the ACRE contract.

2009 SURE Sign up Deadline

The deadline for producers to submit applications for 2009 crop year Supplemental Revenue Assistance Payments Program (SURE) is **July 29, 2011**. The application and all required documentation must be on file and signed by close of business on that day.

A fact sheet with more detailed information is available on the FSA website. Maps of disaster designations by county are on the FSA website at www.fsa.usda.gov/wa. For more information, contact this office.

Farm Changes and Reconstitutions

Any changes in your farm's physical makeup, such as adding or removing land, can impact your acreage base. Farm reconstitutions must be requested by **August 1** to be effective for the 2011 program year. Your farm must comply with program requirements as the operation is currently structured, including required signatures and acreage reporting. Requesting a farm reconstitution after signup could delay your payment, require refunds, or require the process to be completed again.

BUDGET CUTS: Due to budget cuts, this may be the last county newsletter for the fiscal year ending **September 30, 2011**. County offices may not have the funds necessary to print field maps. Producers are encouraged to contact this office for program deadlines and other information.